

NOTICE OF APPEAL

Applicant: Jurgen Reinold et al.  
Case No.: MCG00215  
Serial No.: 09/071,046  
Filed: April 29, 1998  
Art Unit: 2611  
Examiner: Krista Bui  
TITLE: METHOD AND SYSTEM FOR DISTRIBUTING DIGITAL  
AUDIO AND VIDEO TO AN ANALOG WIRELINE DEVICE

Enclosed:


Transmittal Form: 1 page  
Notice of Appeal in triplicate: 1 page  
Charge #320.00 Appeal Fee to Deposit Account 13-4771  
KDW /lw Date: July 1, 2002

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number		09/071,046	
		Filing Date		April 29, 1998	
		First Named Inventor		Jurgen Reinold	
		Group Art Unit		2611	
		Examiner Name		Krista Bui	
Total Number of Pages in this Submission		4	Attorney Docket Number		MCG00215

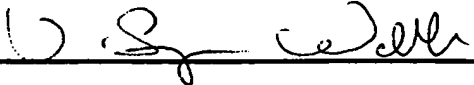
  

ENCLOSURES			(check all that apply)
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-Related papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> Appeal Communication to Group {Appeal Notice, Brief, Reply Brief}  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter with appropriate copies  <input type="checkbox"/> Other Enclosure(s) (please identify below) <div style="margin-left: 20px;"> <input type="checkbox"/> Response to Restriction Requirement  <input type="checkbox"/> Associate Power of Attorney  <input type="checkbox"/> RCE  <input type="checkbox"/> Copy of Notice to File Missing Parts  <input type="checkbox"/> Transmittal of Formal Drawings         </div>	
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Kevin D. Wills	Registration No.	43,993
Signature			
Date	July 1, 2002		

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on the date listed below:	
Typed or printed name	V. Lynn Webb
Signature	
Date	July 1, 2002

